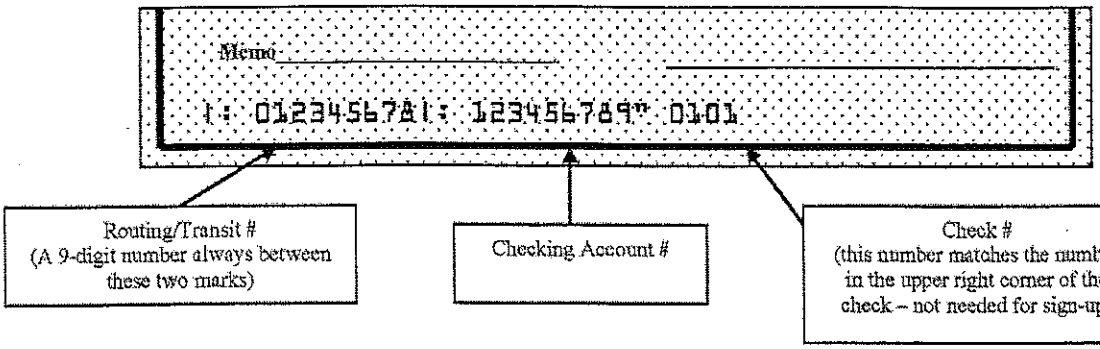
# Direct Deposit Enrollment Form

To enroll in Full Service Direct Deposit, simply fill out this form and give to your payroll manager. Attach a voided check for each checking account - not a deposit slip. If depositing to a savings account, ask your bank to give you the Routing/Transit Number for your account. It isn't always the same as the number on a savings deposit slip. This will help ensure that you are paid correctly.

Below is a sample check MICR line, detailing where the information necessary to complete this form can be found.


Memo
⑆ 012345678⑆ 123456789⑈ 0101
Routing/Transit #
(A 9-digit number always between these two marks)
Checking Account #
Check #
(this number matches the number in the upper right corner of the check – not needed for sign-up)

*Important! Please read and sign before completing and submitting.*

I hereby authorize my employer (hereinafter "Company") to deposit any amounts owed me by initiating credit entries to my account at the financial institution(s) (hereinafter "Bank") indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by Company to my accounts. In the event that Company deposits funds erroneously into my account, I authorize Company to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until Company and Bank have received written notice from me of its termination in such time and in such manner as to afford Company and Bank reasonable opportunity to act on it.

Employee Name: _____

Employee Signature: _____ Date: _____

**Account Information**

You may choose up to three accounts.

1. Bank Name _____

   Routing Transit #: _ _ _ _ _ _ _ _ _ Account Number: _____

   ☐ Checking ☐ Savings ___Entire Net Amount I wish to deposit: $ _____

2. Bank Name _____

   Routing Transit #: _ _ _ _ _ _ _ _ _ Account Number: _____

   ☐ Checking ☐ Savings ___Entire Net Amount I wish to deposit: $ _____

3. Bank Name _____

   Routing Transit #: _ _ _ _ _ _ _ _ _ Account Number: _____

   ☐ Checking ☐ Savings ___Entire Net Amount I wish to deposit: $ _____